

Application Data Sheet

Application Information

Application Type:: Regular
Subject Matter:: Utility
Suggested Group Art Unit::
Title:: LOCKING BOLT WORK APPARATUS FOR ATM
Attorney Docket Number:: D-1223R
Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure:: 1
Total Drawing Sheets:: 13
Small Entity:: No
Petition included?:: No
Secrecy Order in Parent Appl.?:: No

Applicant Information

Inventor Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Richard
Middle Name::	W.
Family Name::	McCracken
Name Suffix::	
City of Residence::	Austintown
State or Prov. Of Residence::	OH
Country of Residence::	US
Street of mailing address::	162 N. Beverly Avenue
City of mailing address::	Austintown
State or Province of mailing address::	OH
Country of mailing address::	US
Postal or Zip Code of mailing address::	44515

Inventor Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Scott
Middle Name:: A.
Family Name:: Mercer
Name Suffix::
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State or Prov. Of Residence:: OH
Country of Residence:: US
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City of mailing address:: Hanoverton
State or Province of mailing address:: OH
Country of mailing address:: US
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Inventor Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Mark
Middle Name::
Family Name:: Bartolomeo
Name Suffix::
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State or Prov. Of Residence:: OH
Country of Residence:: US
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City of mailing address:: North Canton
State or Province of mailing address:: OH
Country of mailing address:: US
Postal or Zip Code of mailing address:: 44720

Inventor Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Terry
Middle Name:: L.
Family Name:: Schreffler
Name Suffix::
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Country of Residence:: US
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State or Province of mailing address:: OH
Country of mailing address:: US
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Inventor Information

Inventor Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Michael
Middle Name::	
Family Name::	Suteu
Name Suffix::	
City of Residence::	Canal Fulton
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Country of Residence::	US
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State or Province::	OH
Country::	US
Postal or Zip Code::	44614

Correspondence Information

Correspondence Customer Number:: 28995

Representative Information

Representative Customer Number::	28995
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Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	An application claiming the benefit under 35 USC 119(e)	60/453,647	03/10/2003
This Application	An application claiming the benefit under 35 USC 119(e)	60/396,642	07/17/2002

Assignee Information

Assignee Name:: Diebold Self Service Systems
division of Diebold, Incorporated

City of mailing address:: North Canton

State or Province of mailing address:: OH